

Chlamydia trachomatis Infection

Agent: *Chlamydia trachomatis* (bacteria)

Mode of Transmission: Person-to-person via sexual transmission, or from the genital tract of an infected mother to her infant during birth.

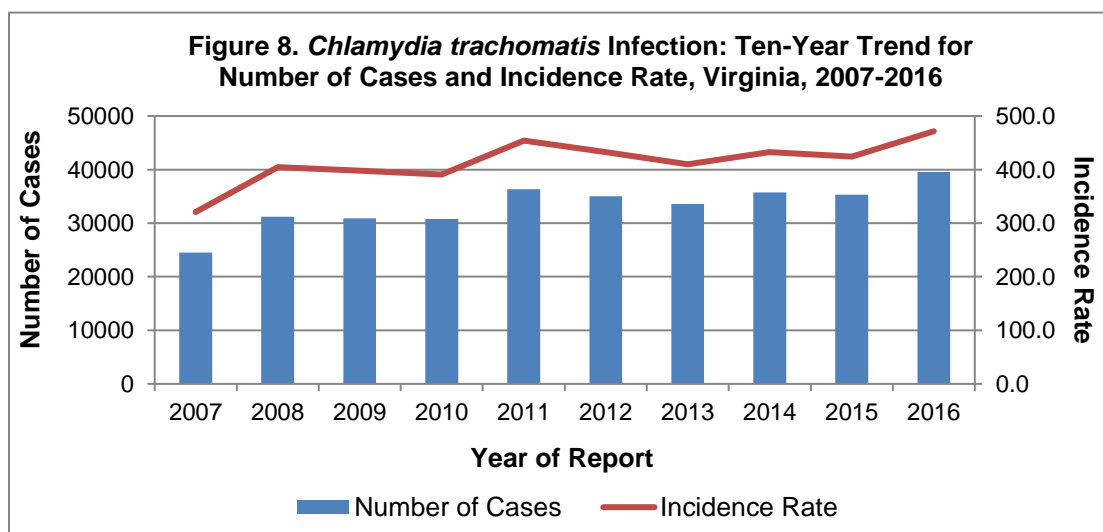
Signs/Symptoms: Men may experience urethritis with discharge, itching, and burning upon urination. Women may experience cervical inflammation, discharge, and vaginal bleeding, but are frequently asymptomatic. Untreated *Chlamydia* can lead to pelvic inflammatory disorder and infertility. Infants may become infected in the eyes or respiratory tract.

Prevention: Preventive measures include adhering to safe sexual practices, screening women less than 25 years of age, and presumptive treatment for *Chlamydia* infection among people who are exposed. Pregnant women who have recently been infected with *Chlamydia* should be retested during the third trimester to prevent postnatal infection in the infant.

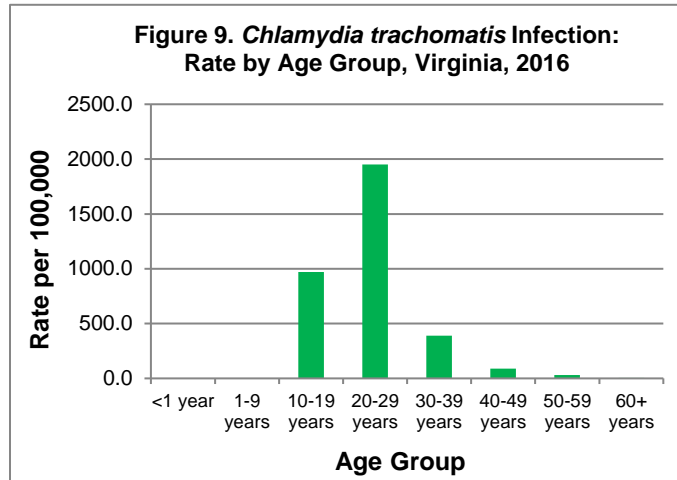
Other Important Information: Many chlamydial infections go undiagnosed and unreported. Approximately 70% of infected women are asymptomatic, and patients are frequently not tested at extragenital (pharyngeal or rectal) sites.

<i>Chlamydia trachomatis</i> Infection: 2016 Data Summary	
Number of Cases:	39,535
5-Year Average Number of Cases:	35,192.0
% Change from 5-Year Average:	+12%
Incidence Rate per 100,000:	471.6

A total of 39,535 cases of *Chlamydia trachomatis* were reported in Virginia during 2016 with a statewide incidence rate of 471.6 cases per 100,000 population (Figure 8). *C. trachomatis* diagnoses remained relatively stable from 2011 through 2015, but increased by 12% in 2016 compared to the previous 5-year average. Nationwide, *C. trachomatis* remains the most frequently reported bacterial sexually transmitted infection. Despite improvements in expanded screening, laboratory test sensitivity, and reporting, CDC estimates that *C. trachomatis* infection is significantly underreported. *C. trachomatis* cases are frequently asymptomatic, and screening programs are focused largely on sexually active women and male partners of infected women.



In 2016, the highest incidence rate occurred in the 20-29 year age group (1,950.8 per 100,000), followed by the 10-19 year age group (969.3 per 100,000) and the 30-39 year age group (388.2 per 100,000) (Figure 9). Incidence rates in the remaining age groups ranged from 88.1 to 0.3 cases per 100,000. Nine cases of *C. trachomatis* ophthalmia neonatorum were reported in infants in 2016; however, ophthalmic (eye) infections due to perinatal exposure are counted as cases of Ophthalmia Neonatorum and not *C. trachomatis* infection. For information on these cases, please see the Ophthalmia Neonatorum section of this report.



C. trachomatis infection was more than six times higher in the black population (879.7 per 100,000) when compared to the white population (131.0 per 100,000) in 2016. Sixty-six percent of *C. trachomatis* infection occurred in females. While women remain disproportionately affected by *C. trachomatis*, the gender gap in infection rates has been narrowing as rates of infection in men increase.

Since 2001, the highest incidence rates each year of *C. trachomatis* infection have occurred in the eastern region. In 2016, a rate of 754.6 cases per 100,000 were reported from the eastern region, while the rate in the central region was 662.8 per 100,000. The remaining regions had incidence rates ranging from 345.8 to 288.3 per 100,000. The map below displays incidence rates by locality.

Chlamydia trachomatis Infection Incidence Rate by Locality Virginia, 2016

